

Notice: The Department is authorized to request the information in this report under ch. 283, Wis. Stats. Proper use of this form will aid permittees in making complete information submittals and thereby minimize the need for subsequent information requests by the Department. If false information from quarterly visual inspections is reported to the Department, you could be subject to penalties up to \$10,000 pursuant to s. 283.91(4), Wis. Stats. Personally identifiable information on this form may be used for other water quality program purposes.

Facility Information

Facility Name

Street Address

City

State

ZIP Code

County

Name of Person Collecting Sample

Laboratory Information

Lab Name

WI Certification Number

Telephone Number

Subcontract Lab Name(s) (if applicable)

Submit lab reports along with all information (including chain of custody forms, quality control data, etc.) received from laboratory.

Sample Information

Discharge or Outfall Number

Sample Number

Description of Outfall or Discharge (pipe, grass swale, channel, etc.)

Date of Sample Collection

Amount of Rainfall (nearest tenth of an inch)

Start Time of Rainfall Event

End Time of Rainfall Event

Start Time of Sample Collection

End Time of Sample Collection

Time Interval Between Sample Collection

Number of Samples Collected

When a facility has more than one outfall which have storm water discharges substantially similar based on consideration of industrial activity, significant materials, and management, one outfall may be selected to represent the group of similar outfalls provided that this strategy has been clearly stated in the facility monitoring plan and that the representative outfall is clearly identified as such on the drainage base map.

Is this outfall representative of other discharges from the facility? ☐ Yes ☐ No

If yes, identify all of the outfalls that this one represents:

Discharge or Outfall Number

Sample Number

Description of Outfall or Discharge (pipe, grass swale, channel, etc.)

Date of Sample Collection

Amount of Rainfall (nearest tenth of an inch)

Start Time of Rainfall Event

End Time of Rainfall Event

Start Time of Sample Collection

End Time of Sample Collection

Time Interval Between Sample Collection

Number of Samples Collected

Is this outfall representative of other discharges from the facility? ☐ Yes ☐ No

If yes, identify all of the outfalls that this one represents:

Discharge or Outfall Number

Sample Number

Description of Outfall or Discharge (pipe, grass swale, channel, etc.)

Date of Sample Collection

Amount of Rainfall (nearest tenth of an inch)

Start Time of Rainfall Event

End Time of Rainfall Event

Start Time of Sample Collection

End Time of Sample Collection

Time Interval Between Sample Collection

Number of Samples Collected

Is this outfall representative of other discharges from the facility? ☐ Yes ☐ No

If yes, identify all of the outfalls that this one represents:

List additional sample information on page 2.

DNR Use Only

FIN

FID

Storm Water Chemical Analysis Report

Form 3400-176B (R 6/05)

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Sample Information (continued)

Discharge or Outfall Number	Sample Number	Description of Outfall or Discharge (pipe, grass swale, channel, etc.)	
Date of Sample Collection	Amount of Rainfall (nearest tenth of an inch)	Start Time of Rainfall Event	End Time of Rainfall Event
Start Time of Sample Collection	End Time of Sample Collection	Time Interval Between Sample Collection	Number of Samples Collected

Is this outfall representative of other discharges from the facility? ☐ Yes ☐ No

If yes, identify all of the outfalls that this one represents:

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Date of Sample Collection	Amount of Rainfall (nearest tenth of an inch)	Start Time of Rainfall Event	End Time of Rainfall Event
Start Time of Sample Collection	End Time of Sample Collection	Time Interval Between Sample Collection	Number of Samples Collected

Is this outfall representative of other discharges from the facility? ☐ Yes ☐ No

If yes, identify all of the outfalls that this one represents:

Mailing

Unless otherwise directed, mail this completed form to the DNR office listed by county as follows:

Northern Region Counties

Ashland	Lincoln	DNR Service Center
Barron	Oneida	1401 Tower Avenue
Bayfield	Polk	Superior, WI 54880
Burnett	Price	
Douglas	Rusk	Phone: (715) 392-7988
Florence	Sawyer	
Forest	Taylor	
Iron	Vilas	
Langlade	Washburn	

South Central Region Counties

Columbia	Iowa	DNR South Central Region
Crawford	Jefferson	3911 Fish Hatchery Road
Dane	LaFayette	Fitchburg, WI 53711
Dodge	Richland	
Grant	Rock	Phone: (608) 275-3266
Green	Sauk	

Northeast Region Counties

Brown	Marquette	DNR Northeast Region
Calumet	Menomonee	PO Box 10448
Door	Oconto	Green Bay, WI 54307
Fond du Lac	Outagamie	
Green Lake	Shawano	Phone: (920) 662-5100
Kewaunee	Waupaca	
Manitowoc	Waushara	
Marinette	Winnebago	

Southeast Region Counties

Kenosha	Sheboygan	DNR Southeast Region
Milwaukee	Walworth	Stormwater Program
Ozaukee	Washington	2300 N Dr Martin Luther King Jr Dr
Racine	Waukesha	Milwaukee, WI 53212
		Phone: (414) 263-8500

West Central Region Counties

Adams	Marathon	DNR Service Center
Buffalo	Monroe	5301 Rib Mountain Road
Chippewa	Pepin	Wausau, WI 54401
Clark	Pierce	
Dunn	Portage	Phone: (715) 359-4522
Eau Claire	St. Croix	
Jackson	Trempealeau	
Juneau	Vernon	
La Crosse	Wood	